

Work Order ID 91798

October-18-12 1:57:37 PM

Item ID: 647.1710

Revision ID:

Item Name: Plate

Start Date: 18/10/2012 Start Qty: 12.00

Accept

N900040100

Setup

Start

NS1

Required Date: 01/11/2012 Req'd Qty: 12.00

12

12

Cust Item ID:

Customer:

Reference:

Approvals: Process Plan: M6.5

Date: 12-10-12 Tooling:

Date:

Run

Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr								
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647.1700	N/C								
----------	-----	--	--	--	--	--	--	--	--

110		0.00							
-----	--	------	--	--	--	--	--	--	--

110									
-------	--	--	--	--	--	--	--	--	--

Waterjet	Memo	0.00							
----------	------	------	--	--	--	--	--	--	--

FLOW CNC Waterjet	1-Cut as per Dwg								
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7075.160"	Dwg Rev: NYC								
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	Prog Rev: NYC								
--	---------------	--	--	--	--	--	--	--	--

	2-Deburr if necessary								
--	-----------------------	--	--	--	--	--	--	--	--

120	QC2- Inspect parts off machine FAI/FAIB	0.00							
-----	---	------	--	--	--	--	--	--	--

120	Memo	0.00							
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QC									
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Quality Control									
-----------------	--	--	--	--	--	--	--	--	--

91798

Page 1

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order:		DISPOSITION			AGAINST DEPARTMENT/PROCESS						
		Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
		Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality	<input type="checkbox"/>
		Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>
		Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							

Work Order ID 91798

October-18-12 1:57:37 PM

91798

Page 2

Item ID: 647.1710

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Plate

Start Date: 18/10/2012 Start Qty: 12.00

12

Cust Item ID:

Required Date: 01/11/2012 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:		Stop	*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* QC	QC8- Inspect parts - second check	0.00	DAS 15 8-89			12			
140 *140* Brake NC Brake NC	Memo	0.00				12			S 13/10/12
150 *150* QC	Form as per dwg	0.00							
	Memo	0.00							
	QC5- Inspect part completeness to step on W/O	0.00	SMF						
	Memo	0.00	13-1-18			12			

170-

AM
180-Qc 5

SMF

134.10

Received

Pax

SP
13-4-9
DTR

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order:		DISPOSITION			AGAINST DEPARTMENT/PROCESS						
		Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
		Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality	<input type="checkbox"/>
		Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>
		Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data		190		Spray paint as per drawing							
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				Bending	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>				
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld	<input type="checkbox"/>				
Crushed/Crimped.	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled	<input type="checkbox"/>				
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>		<input type="checkbox"/>				
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>		<input type="checkbox"/>				
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>		<input type="checkbox"/>				
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>				

Work Order ID 91798

91798

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Page 3

Item ID: 647.1710

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Plate

Stop

NS2

Start Date: 18/10/2012 Start Qty: 12.00

12

Cust Item ID:

Required Date: 01/11/2012 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID
160 210

Operation
Description

Identify as per dwg & Stock Location: *ST 538* 0.00

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

Packaging

Memo

0.00

12x

SP
13-8-13

Packaging

IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV

220

QC21- Final Inspection - Work Order Release

0.00

13/5/13

170

QC

Quality Control

Memo

0.00

MP
135-13

160

issue PO for quodizing
of A.T.G.

PL/13-03-7

PO 19280

190
Spray Painting

Batch # 125243

Carolina 4866-50-Primer

(12)

SP.13/
13-05-5

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: Date:

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear			General								
Bending	Bend	Grain	Ovalized	Pressure/Forced							
Centre Not Concentric to O/S	BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure							
Cracks	Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld							
Crushed/Crimped.	Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled							
Cuffs	Contamination	Maintenance	Part Moved								
Heat Treat	Countersink	Mislabeled	Positioned Wrong								
Inspection Strip in Tube	Cut Too Short	Misread	Power Loss/Surge								
Ripples in Bend	Drill Holes	Offset									
Torque Waves in Extrusion	Drawing	Out of Calibration									
Turning Sequence	Finish	Out of Sequence									
Wave/Twist in Tube	Folio	Outside Dimensions									

Picklist Print

October-18-12 1:57:41 PM

Page 1

Work Order ID: 91798

91798

Parent Item: 647.1710

647 1710

Parent Item Name: Plate

Start Date: 18/10/2012

Required Date: 01/11/2012

Start Qty: 12.00

Required Qty: 12.00

Comments: IPP REV:A 12.10.04 NEW ISSUE DD VERF:JFS

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6S.160		Purchased		No		110	sf	0.0000	1.096	13.84421	**	14.0	Jm 12-12-4

M7075T6S 160

7075-T6 Sheet .160

[123644]

123644

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other						

APICAL
INDUSTRIES, INC.

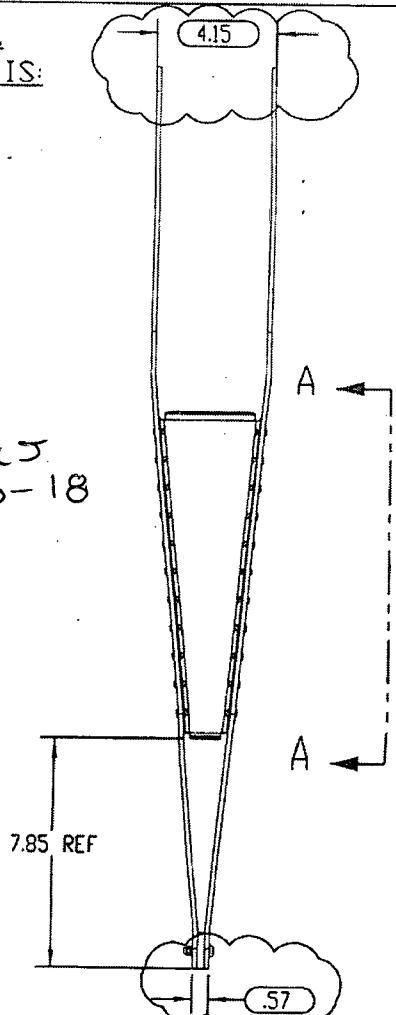
ENGINEERING CHANGE NOTICE NO. 02937				SHEET 1 OF 1
DWG NO. 647.1700	REV: NC	PREPARED BY J. JACKSON	DATE: 07/14/10	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.
DWG TITLE: SKID DEFLECTOR ASSY				
APPROVED BY:	ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: CURRENT ORDER
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE				
REASON: REVISED F/N 8 AND NOTE ③ . ADDED INSPECTION DIMENSIONS TO DRAWING VIEWS.				

SHEET 1, ZONE A1 IS:

③ FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2 COLOR BLACK;
PRETREAT PRC-DESOTO PR-148 ADHESION PROMOTER, COLOR BLUE;
PRIME IAW MIL-P-23377J TYPE I CLASS N

SHEET 2,
ZONE A1 IS:

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 91398 MCJ
12-10-18



F/N	TC	PART NUMBER	QTY	DESCRIPTION	CHANGE CATEGORY	DER REVIEW REQUIRED
8	R	601.1622	1	SCREW	MS27039-1-14	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
DOCUMENTS EFFECTED:						
				<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> FMS <input type="checkbox"/> ICA <input checked="" type="checkbox"/> BOM	<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	

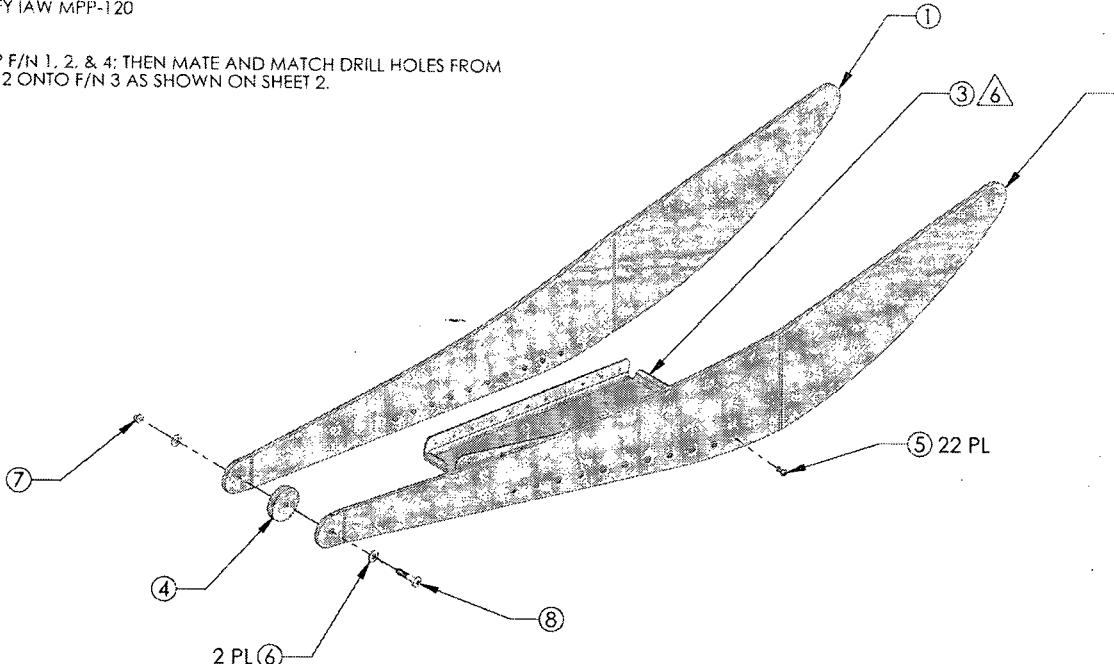
THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF
APICAL INDUSTRIES AND IS NOT TO BE REPRODUCED OR DISCLOSED
EXCEPT PURSUANT TO AN AGREEMENT MADE IN WRITING
BETWEEN APICAL INDUSTRIES & FROHNER.

REV	ISSUE DATE	DATE	APPLICABILITY
A	APRIL 1974	N/A	APRIL 1974
N/C	NOV 12 1974	NOV 12 1974	N/C

91798

NOTES:

- 1 MATERIAL: 7075-T6 ALUMINUM PER AMS-QQ-A-250/12
- 2 MATERIAL: 6061-T6 ALUMINUM BAR IAW AMS-QQ-A-250/11
- 3 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2.
COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER;
PRIME IAW MIL-P-23377J TYPE I CLASS N
- 4. DEBURR AND BREAK ALL SHARP EDGES
- 5. IDENTIFY IAW MPP-120
- 6 CLAMP F/N 1, 2, & 4; THEN MATE AND MATCH DRILL HOLES FROM
F/N 1& 2 ONTO F/N 3 AS SHOWN ON SHEET 2.



UNINCORPORATED ECN(s)

02937

QTY	1	8	601.2637	SCREW	MS2005-1-13
1	1	7	601.2943	LOCKNUT	MS210123
2	6	601.1607		WASHER	MS1149P0352P
22	5	601.1915		RIVET	CR3213-4-4
1	4	647.1713		SPACER	△ △
1	3	647.1712		GUSSET	△ △
1	2	647.1711		PLATE	△ △
1	1	647.1710		PLATE	△ △
		647.1701		SKID DEFLECTOR ASSY	
.1701	FIND #	PART #	DESCRIPTION	MATL	SPEC.

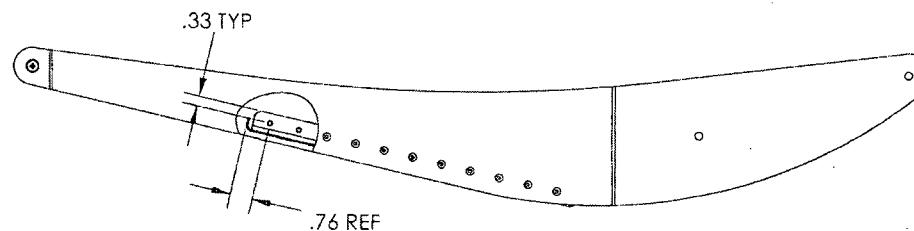
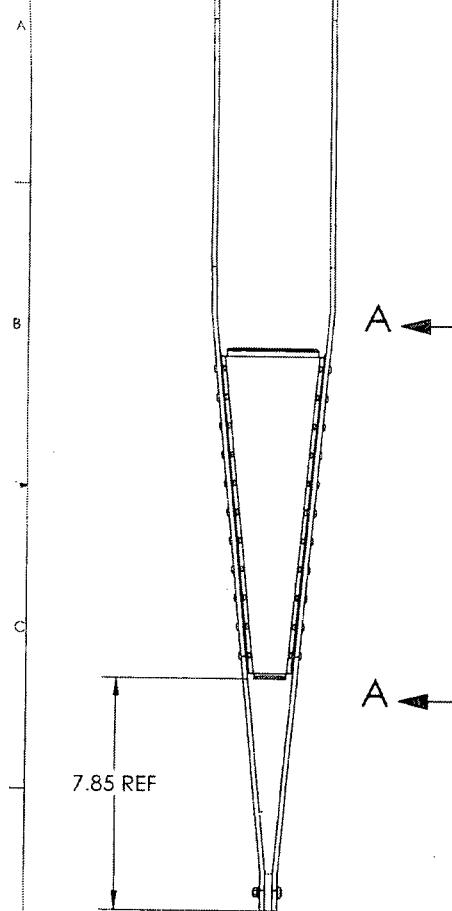
PARTS LIST

OFFICIAL DATE	APICAL INDUSTRIES
REVISION BY	2608 TEMPLE HEIGHTS DR.
CHECKED BY	OCEANSIDE, CA. 92056-3512 (760)724-5300
1 GARDNER P BRAVO	
DATE ISSUED	
647.1300	
CONTRACTING	SKID DEFLECTOR ASSY
UNLESS OTHERWISE SPECIFIED	
ALL DIMENSIONS ARE	
IN INCHES	
TOLERANCES ARE	
AS PER ASME Y14.5M-1994	
3 PLACE DECIMALS, 2 DEC	
ANGLES ± 5°	
B CAGE CODE	647.1700
DRAWING NO	
07M76	
REV	N/C
SCALE NONE	
1 SHEET	1 OF 5

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91798

REV	DESCRIPTION	DATE	APPLICABLE

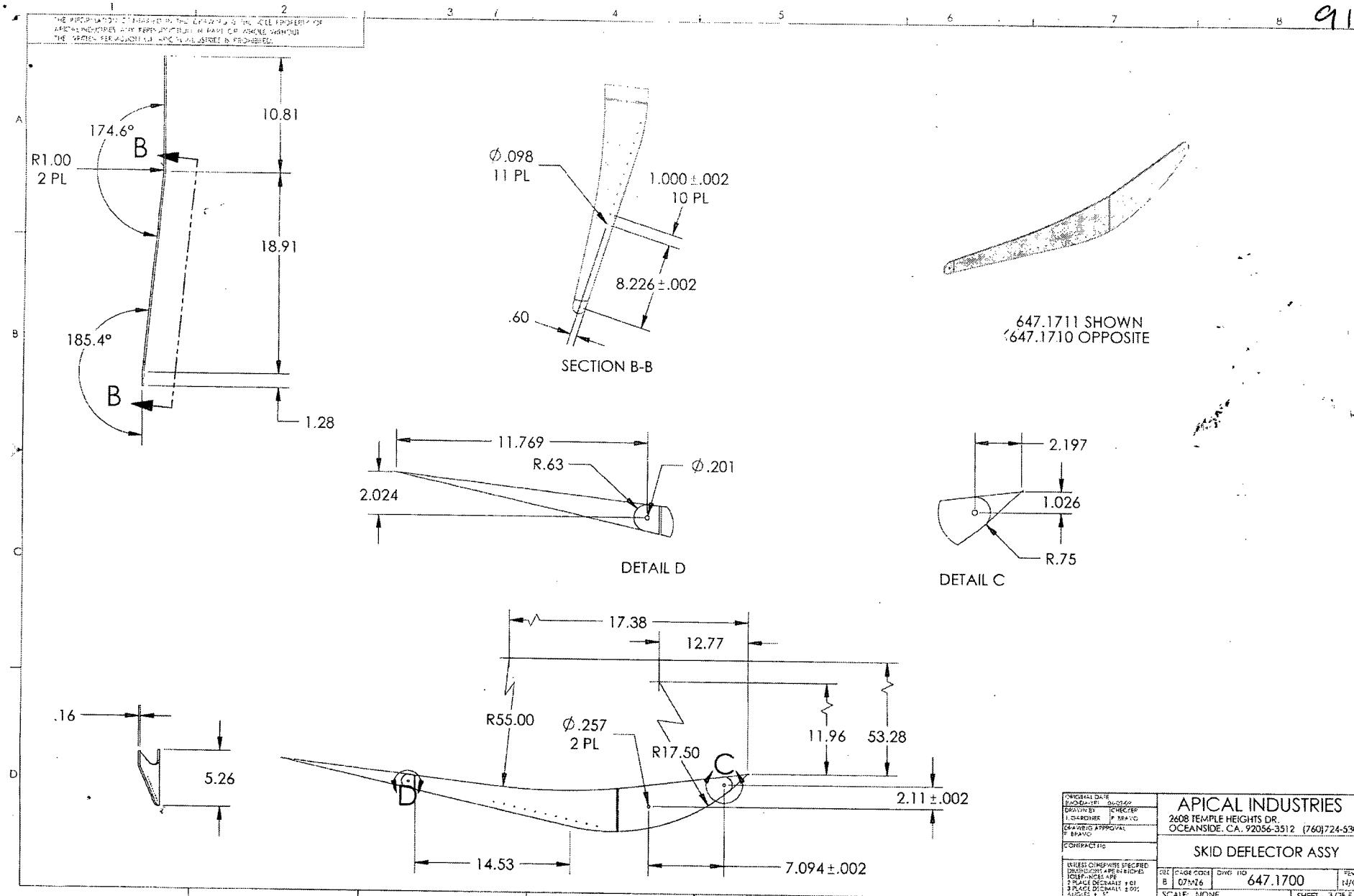


SECTION A-A

ORIGINAL DATE	0-07-08	APICAL INDUSTRIES
DRAWN BY	J. GARDNER	2608 TEMPLE HEIGHTS DR.
DESIGNED BY	P. BRAVO	OCEANSIDE, CA. 92056-3512 (760)724-5300
DRAWING APPROVAL		
P. BRAVO		
CONTRACT NO.		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: ±.005 UNLESS OTHERWISE SPECIFIED 3 PLACE DECIMALS ± .001 ANGLES ± 5°		
REV CAGE CODE	DMG. NO.	REV
B 07M16	647.1700	N/C
SCALE NONE		SHEET 2 OF 5

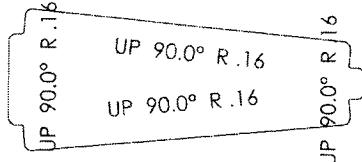
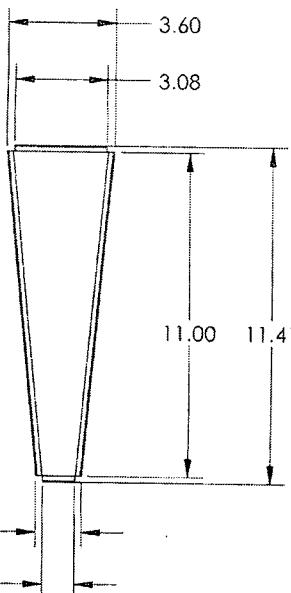
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91798



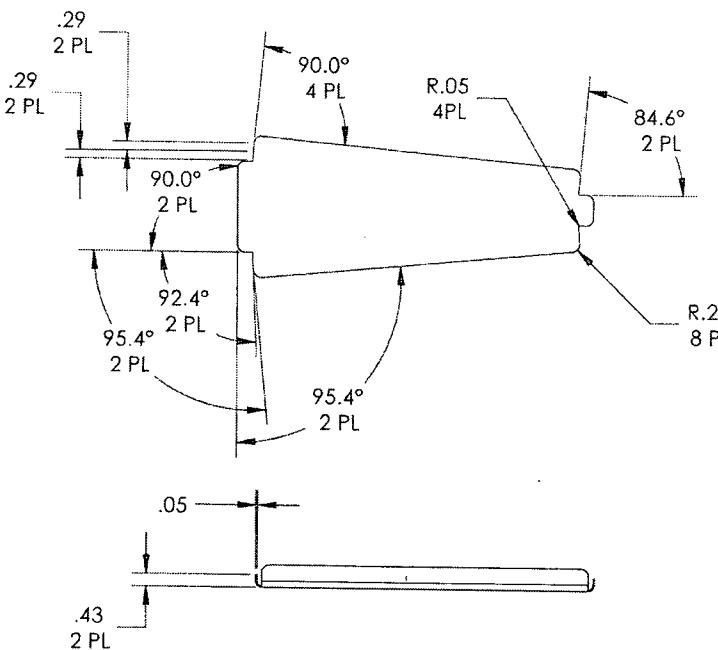
ORIGINAL DATE	07-26-96	APICAL INDUSTRIES
DRAWN BY	I. GARDNER	2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300
REVISED APPROVAL	P. BRAVO	
CONTRACT NO.		SKID DEFLECTOR ASSY
DESIGN CREDITS	APL	DATE CODE: B 07-26-96
PRINTED CREDITS	APL	Dwg. No: 647.1700
3 PLACE DECIMALS: 10.0		REV: N/C
ANGLES: ± 5°		SCALE: NONE
		SHEET: 3 OF 5

ITEM	DESCRIPTION	QTY	UNITS



FLAT PATTERN

647.1712



ORIGINAL DATE	01-10-07
DRAWN BY	J. GARDNER
REVIEWED BY	J. GARDNER
APPROVAL	P. DIAVO
CONTRACT NO.	
IF OTHER THAN SPECIFIED TOLERANCES ARE AS PER ASME Y14.5M-1994 TOLERANCES ARE 1 PLACE DECIMALS ± .005 ANGLES ± 2°	
REL CAGE CODE	647.1700
REL CAGE NO	8 07426
SCALE	NONE
SHEET	4 OF 5

APICAL INDUSTRIES

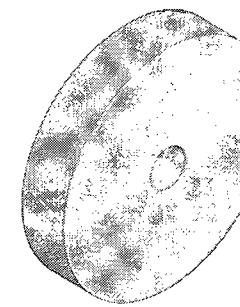
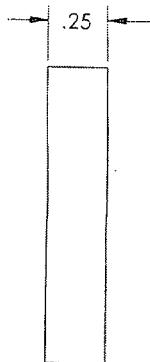
2608 TEMPLE HEIGHTS DR.
OCEANSIDE, CA. 92056-3512 (740)724-5300

SKID DEFLECTOR ASSY

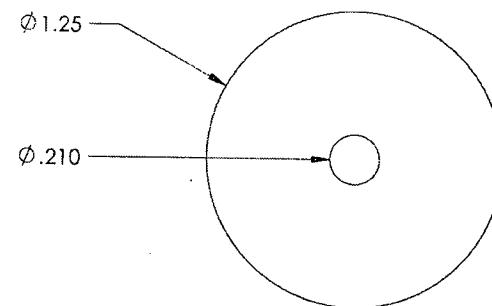
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91798

REV	DISCREPANCY	CORR APPROVAL



647.1713



ORIGINAL DATE	REVISION DATE
REVISER	REVISER
J. GARDNER	P. BRAVO
DRAWING APPROVAL	
P. BRAVO	
CORPORATION	
UNLESS OTHERWISE SPECIFIED	
ALL DIMENSIONS ARE IN INCHES	
TOLERANCES ARE	
.005	
.005	
ANGLES ± 2°	
SIZE	CAGE CODE
B	07M26
SCALE	REV
NONE	N/C
SHEET 5 OF 5	

APICAL INDUSTRIES

260B TEMPLE HEIGHTS DR.
OCEANSIDE, CA. 92056-3512 (760)724-5300

SKID DEFLECTOR ASSY

647.1700

DART AEROSPACE LTD

Work Order: 91798

Description: Plate

Part Number: 677-1310

Inspection Dwg: 647.17cc Rev: N/c

Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Measured by:	Jm
Date:	2-12-9

Audited by:	SAS 15
Date:	10/18/03

Preliminary Approval:	
	Date:



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62300

Date: 08-Apr-1

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms	Ship Via	
Quantity	Description	Rev:
1 lot	Part: ASST 24 PCS 647.1711 15 PCS 647.1712 31 PCS 647.1910 8 PCS 647.1911 5 PCS 647.7911 12 PCS 647.1710 HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 Job: 20130197	PO: 19280 Line:
Certificate of Conformance		
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.		
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY		
DATE : <u>8/9/13</u>		
CERTIFIED SIGNATURE : <u>[Signature]</u>		
RECEIVER SIGNATURE : _____		